

Notice to Comply

Application N .

09/640,041

Examiner

Margaret E Jamroz

Applicant(s)

KAVANAUGH ET AL.

Art Unit

1644

NOTICE TO COMPLY WITH REQUIREMENTS FOR PATENT APPLICATIONS CONTAINING NUCLEOTIDE SEQUENCE AND/OR AMINO ACID SEQUENCE DISCLOSURES

Applicant must file the items indicated below within the time period set the Office action to which the Notice is attached to avoid abandonment under 35 U.S.C. § 133 (extensions of time may be obtained under the provisions of 37 CFR 1.136(a)).

The nucleotide and/or amino acid sequence disclosure contained in this application does not comply with the requirements for such a disclosure as set forth in 37 C.F.R. 1.821 - 1.825 for the following reason(s):

- ☒ 1. This application clearly fails to comply with the requirements of 37 C.F.R. 1.821-1.825. Applicant's attention is directed to the final rulemaking notice published at 55 FR 18230 (May 1, 1990), and 1114 OG 29 (May 15, 1990). If the effective filing date is on or after July 1, 1998, see the final rulemaking notice published at 63 FR 29620 (June 1, 1998) and 1211 OG 82 (June 23, 1998).
- ☒ 2. This application does not contain, as a separate part of the disclosure on paper copy, a "Sequence Listing" as required by 37 C.F.R. 1.821(c).
- ☒ 3. A copy of the "Sequence Listing" in computer readable form has not been submitted as required by 37 C.F.R. 1.821(e).
- ☐ 4. A copy of the "Sequence Listing" in computer readable form has been submitted. However, the content of the computer readable form does not comply with the requirements of 37 C.F.R. 1.822 and/or 1.823, as indicated on the attached copy of the marked -up "Raw Sequence Listing."
- ☐ 5. The computer readable form that has been filed with this application has been found to be damaged and/or unreadable as indicated on the attached CRF Diskette Problem Report. A Substitute computer readable form must be submitted as required by 37 C.F.R. 1.825(d).
- ☐ 6. The paper copy of the "Sequence Listing" is not the same as the computer readable form of the "Sequence Listing" as required by 37 C.F.R. 1.821(e).
- ☐ 7. Other:

Applicant Must Provide:

- ☒ An initial or substitute computer readable form (CRF) copy of the "Sequence Listing".
- ☒ An initial or substitute paper copy of the "Sequence Listing", as well as an amendment directing its entry into the specification.
- ☒ A statement that the content of the paper and computer readable copies are the same and, where applicable, include no new matter, as required by 37 C.F.R. 1.821(e) or 1.821(f) or 1.821(g) or 1.825(b) or 1.825(d).

For questions regarding compliance to these requirements, please contact:

For Rules Interpretation, call (703) 308-4216

For CRF Submission Help, call (703) 308-4212

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Washington, D.C. 20231

SERIAL NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO.

EXAMINER	
ART UNIT	PAPER NUMBER

DATE MAILED:

Please find below a communication from the EXAMINER in charge of this application.

Commissioner of Patents

This application contains sequence disclosures that are encompassed by the definitions for nucleotide and/or amino acid sequences set forth in 37 CFR 1.821(a)(1) and (a)(2). However, this application fails to comply with the requirements of 37 CFR 1.821 through 1.825 for the reason(s) set forth on the attached Notice To Comply With Requirements For Patent Applications Containing Nucleotide Sequence And/Or Amino Acid Sequence Disclosures.

APPLICANT IS GIVEN ONE EXTENDIBLE MONTH FROM THE DATE OF THIS LETTER WITHIN WHICH TO COMPLY WITH THE SEQUENCE RULES, 37 CFR 1.821 - 1.825. Failure to comply with these requirements will result in ABANDONMENT of the application under 37 CFR 1.821(g). Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136. In no case may an applicant extend the period for response beyond the six month statutory period. Direct the response to the undersigned. Applicant is requested to return a copy of the attached Notice to Comply with the response.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to _____ whose telephone number is (703) 30 _____

Serial Number:

09/640041

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☐

DISK TO STIC

REQUEST TO STIC

- | | N/A | YES | NO | |
|--|-------------------------------------|-------------------------------------|-------------------------------------|--|
| A. 1 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Sequence in Case |
| a. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Paper Copy of Sequence Present |
| b. | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Statement that Disk and Paper Copy are the Same |
| 2 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2964 CRF Entered |
| 3 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Sequence Complies with Sequence Rules (If No see Attached Letter) |
| 4 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | CRF entered in parent |
| 5 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Figures seen by draftsman |
| 6 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Abstract |
| 7 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Oath/Declaration in file |
| 8 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Oath/Declaration signed by all applicants |
| 9 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Oath/Declaration includes all residences |
| 10 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Oath/Declaration includes Foreign continuity Data |
| 11 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Oath/Declaration includes US continuity Data |
| 12 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Corrected Filing Receipt Requested |
|
B. Examiner - Please check to determine if the following are required: | | | | |
| 1 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Restriction Requirement |
| 2 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Sequences in claims not in compliance with sequence rules and may be required to search case |

If any of part B above are necessary, please act on and complete within 15 days.

EC Ward

Reviewers Name

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